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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

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Office Use (Qnl) 1 All CFN TF

2. FEC IDENTIFICATION NUMBER 3. IS THIS REPORT NEW (N) OR AMENDED (A) 4. TYPE OF REPORT (Choose One) (b): 12-Day PRE-Election Report for the: (a) Quarterly Reports: Primary (12P) General (12G) Rur (b): 12-Day PRE-Election Report for the: (c) Special (12S) In the State of (d) Quarterly Report (Q3) General (12G) In the State of (e) 30-Day POST-Election Report for the: (f) General (30G) Runoff (30R) Special (12S) (g) Runoff (30R) Special (12S) (h): 12-Day PRE-Election Report for the: (h					ice icae (Cult 1) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
ADDRESS (number and street) Check if different than previously reported, (ACC) CITY A STATE A ZIP CODE STATE V AMENDED AMENDED (a) Quarterly Report (Choose One) (a) Quarterly Report (Choose One) (b): 12-Day PRE-Election Report for the: April 15 Quarterly Report (Q3) Convention (12C) Special (12S) January 31 Year-End Report (YE) General (30G) Runoff (30R) Special (12S) Fermination Report (TER) Election on Termination Report (TER) Signature of Treasurer Date CTY A STATE A ZIP CODE STATE V (c) 3. IS THIS NEW (A) NEW AMENDED AMENDED AMENDED AMENDED (A) Convention (12C) Special (12S) Fundary (12P) General (12G) Runoff (30R) Special (12S) In the State of State of State of State of Certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Date		PE OR PRINT ▼		12FE4M5	
ADDRESS (number and street) Check if different than previously reported (ACC) CITY A STATE A ZIP CODE CITY A STATE A ZIP CODE 3. IS THIS REPORT (N) OR AMENDED (A) 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) Quarterly Report (Q2) Dotober 15 Quarterly Report (Q3) Dotober 15 Quarterly Report (Q3) Financy (12P) General (12G) Fin the State of General (30G) Runoff (30R) Special (12S) Fermination Report (TER) Fermination Report (TER) Lection on Termination Report (TER) Signature of Treasurer Date	lue south	 	 	 	
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than previously reported. (ACC) 2. FEC IDENTIFICATION NUMBER 2. STATE 2. STATE 2. STATE 2. STATE 2. STATE 3. IS THIS REPORT (N) OR AMENDED (A) 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: (b): 12-Day PRE-Election Report for the: (a) April 15 Quarterly Report (Q1) (b): 12-Day PRE-Election Report for the: (c) 30-Day POST-Election Report for the: (d) Termination Report (TER) (e) 30-Day POST-Election Report for the: (f) Termination Report (TER) (h): 12-Day PRE-Election Report for the: (c): 30-Day POST-Election Report for the: (d): 12-Day PRE-Election Report for the: (e): 30-Day POST-Election Report for the: (e): 30-Day POST-Election Report for the: (f): 12-Day PRE-Election Report for the: (h): 12-Day	DRESS (number and street)	CMTish:	ing, rough		
2. FEC IDENTIFICATION NUMBER C	than previously	Lateral Lateral		1 hT 100	(X7)-1
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: (b) 12-Day PRE-Election Report for the: (a) Quarterly Report (Q1) (b) 12-Day PRE-Election Report for the: (c) Special (12G) (d) Primary (12P) (e) General (12G) (f) Run (12C) (f) Special (12S) (g) Frimary (12P) (g) General (12G) (h) Run (12C) (h) 12-Day PRE-Election Report for the: (g) General (12G) (h) 12-Day PRE-Election Report for the: (h) 12-Day PRE-Election Report for th	reported. (ACC)	•		STATE ▲	ZIP CODE ▲
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: (b) 12-Day PRE-Election Report for the: (a) Quarterly Report (Q1) (b) 12-Day PRE-Election Report for the: (c) Special (12G) (d) Primary (12P) (e) General (12G) (f) Rur (in the State of State o	FEC IDENTIFICATION NU	BER ▼			٦
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: (b): 12-Day PRÉ-Élection Report for the: (c) April 15 Quarterly Report (Q1) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) General (30G) Termination Report (TER) Election on State of Election on Through To a state of In the State of State of Covering Period To a state of Treasurer Date (b): 12-Day PRÉ-Élection Report for the: Convention (12C) Special (12G) Run the State of State of Through To a state of To a state of Covering Period Date (c) 30-Day POST-Election Report for the: Election on Through To a state of Through To a state of Signature of Treasurer Date	C	3. IS T			STATE ▼ DISTRICT
(a) Quarterly Reports: April 15 Quarterly Report (Q1) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Termination Report (TER) Election on M. M. O O O O O O O O O O O O O O O O O		REP	ORT (N) OR	(A)	لىا لىبا
State of January 31 Year-End Report (YE) General (30G) Termination Report (TER) State of Election on General (30G) Funoff (30R) Special (30G) Funoff (30R) Funoff (30R) Special (30G) Funoff (30R) Special (30G) Funoff (30R) Fun	(a) Quarterly Reports: April 15 Quarterly Re	ort (Q1)	Primary (12P)	General (12G	
Termination Report (TER) Election on Special (30G) Runoff (30R) Special (30G) Runoff (30R) In the State of State o	October 15 Quarterly	Report (Q3) Elec	tion on		8 1
Termination Report (TER) Election on Election on To by the State of Stat	January 31 Year-End	leport (YE) (c) 30-Di	ay POST-Election Report fo	r the:	
5. Covering Period 70" 75 2018 through 70 75 7015 I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Date Date	m		General (30G)	Runoff (30R)	Special (30S)
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Date Date	Termination Report ((tion on .	D / Y Y Y	1 1
Type or Print Name of Treasurer College Deputing Signature of Treasurer Date	Covering Period	1951201	through	70 15 1	1015
Signature of Treasurer Date	ertify that I have examined this	Report and to the best o	of my knowledge and belief	it is true, correct and c	omplete.
Signature of Treasurer Date	pe or Print Name of Treasurer	ul Des	Palma		
		· · · · · · ·		Date O	09/2015
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U		s, or incomplete information	on may subject the person si	gning this Report to the p	penalties of 52 U.S.C. §30109.
	Üse		 		FEC FORM 3 (Revised 02/2003)

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[FEC Form 3 (Revised 02/2003)	SUMMARY PAGE of Receipts and Disbursements	Page 2
w	rite	or Type Committee Name		
R	eport	: Covering the Period: From:	0 ' 25 7 2074 TO	: BN 'BO' FEYS
_			COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net	Contributions (other than loans)		
	(a)	Total Contributions (other than loans) (from Line 11(e))	15500	15560
	(b)	Total Contribution Refunds (from Line 20(d))		
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	,, 155	155
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	122
	(b)	Total Offsets to Operating Expenditures (from Line 14)		
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	, 172	, 12.2.
8.		on the conting Period (from Line 27)	33.00	
9.	the	ots and Obligations Owed TO Committee (Itemize all on nedule C and/or Schedule D)		
10.	the	ots and Obligations Owed BY Committee (Itemize all on nedule C and/or Schedule D)		

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

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	SUMN		
	►I IN/IN	лдыч	
ULLU	CONTIN		IAUL

FEC Form 3 (Revised 12/2003)

of Receipts

Page 3

Write or Type Committee Name

Report Covering the Period:

From:



To:



	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11.	CONTRIBUTIONS (other than loans) FROM:		
	(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)		
	(ii) Unitemized		
	(b) Political Party Committees		
	(d) The Candidate		
12.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
13.	LOANS: (a) Made or Guaranteed by the Candidate		
	(b) All Other Loans		
14.	OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
15.	OTHER RECEIPTS (Dividends, Interest, etc.)		
16.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)		, 155

1503-137-1700

DETAILED SUMMARY PAGE

FFC Form 3 (Revised 02/2003)

of Disbursements

Page 4

	FEC FORM 3 (Revised 02/2003)		Fage 4
	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES		
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate		
	(b) Of All Other Loans		
20.	REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees		
	(b) Political Party Committees		
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))		
21.	OTHER DISBURSEMENTS		
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	III. CASH SUMI	MARY	
23.	CASH ON HAND AT BEGINNING OF REPORTIN	NG PERIOD	,,
24	TOTAL RECEIPTS THIS PERIOD (from Line 16,	page 3)),00
25.	SUBTOTAL (add Line 23 and Line 24)		
26.	TOTAL DISBURSEMENTS THIS PERIOD (from L	ine 22)	-5.5.1 ₀
27.	CASH ON HAND AT CLOSE OF REPORTING P (subtract Line 26 from Line 25)		

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7 1
70

SCHEDULE A (FEC Form 3)

PAGE OF FOR LINE NUMBER: Use separate schedule(s) (check only one)

TEMIZED RECEIPTS	Detailed Summary Page	11a 11b 11c 11d 12 13a 13b 14 15
Any information copied from such Reports and Statemer or for commercial purposes, other than using the name a		rson for the purpose of soliciting contributions
NAME OF COMMITTEE (IN FUIL)		
Full Name (Last, First, Middle Initial) A. Mailing Address Hall Charles	I	Date of Receipt
City Straille State	e Zip Code CL 184	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
	on Cycle-to-Date	^
Full Name (Last, First, Middle Initial) B.		Date of Receipt
Mailing Address City Stat	e Zip Code	
FEC ID number of contributing federal political committee. Name of Employer Occup	pation	Amount of Each Receipt this Period
Receipt For: Primary General Other (specify)	on Cycle-to-Date	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address City Stat	e Zip Code	M M / D V D / V B V B V V V V
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
Name of Employer Occup	pation	
Receipt For: Primary General Other (specify)	on Cycle-to-Date	
SUBTOTAL of Receipts This Page (optional)	160	
TOTAL This Period (last page this line number only)		

137
1702

SCHEDULE B (FEC Form 3)	Use separate schedule(s)	(check only one)				
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	17 18 19a 19b 20a 20b 20c 21				
Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and a						
NAME OF COMMITTEE (IN Full). BLUC SOUTH						
Full Name (Last, First, Middle Initial) A. Co DCULL Mailing Address		Date of Disbursement				
State 72	Zip Code	Amount of Each Disbursement this Period				
Purpose of Disbursement Wh Bulluge Candidate Name NM	Category					
Office Sought: House Disbursement For Senate Primary Other (s	General					
Full Name (Last, First, Middle Initial)		Date of Disbursement				
Mailing Address	,	M M / D D / Y Y Y Y Y				
City State	Zip Code	Amount of Each Disbursement this Period				
Purpose of Disbursement		The second secon				
Candidate Name	Category Type	™				
Office Sought: House Disbursement For Senate Primary Other (s	General					
Full Name (Last, First, Middle Initial)						
C.		Date of Disbursement				
Mailing Address						
•	p Code	Amount of Each Disbursement this Period				
Purpose of Disbursement						
Candidate Name	Category Type	, , , , , , , , , , , , , , , , , , ,				
Office Sought: House Disbursement For Senate Primary Other (s	General					
State: District:						
SUBTOTAL of Disbursements This Page (optional)						
TOTAL This Period (last page this line number only)		ment transport y warmer membranes of moral according to the second second				

CHEDULE C (FEC	Form 3)			rate schedule(s) category of the	PAGE FOR LINE NUMBER	()
OANS				Summary Page	(check only one)	13a 13b
IAME OF COMMITTEE (In FI	111)/					
LOAN SOURCE Full Nar	ne (Last, First, Mid	dle Initial)	<u> </u>	Ele	ection:	
				-	Primary General	
Mailing Address					Other (specify) ▼	
City		State ZIF	² Code		· · · · · · · · · · · · · · · · · · ·	
Original Amount of Loan		Cumulative Paymer	nt To Date		Outstanding at Close	
(3)						
TERMS Date Incur	red	Date	Due	Interest Rate	Seci	ured:
M M / D D /	, , , , ,	M M / D D /	, , , , ,		% (apr)	Yes No
List All Endorsers or Gu		Loan Source				
1. Full Name (Last, First,	, Middle Initial)		Name of Em	ployer		
Mailing Address			Occupation			
City	Chan	710 Codo	Amount Guaranteed	7		~ ~
City	State	ZIP Code	Outstanding:			أستسا
2. Full Name (Last, First,	Middle Initial)		Name of Em	ployer		
Mailing Address			Occupation			
			Amount			
City	State	ZIP Code	Guaranteed Outstanding:			
3. Full Name (Last, First,	Middle Initial)		Name of Em	ployer		
Mailing Address			Occupation	· • • • • • • • • • • • • • • • • • • •		
			Amount			
City	State	ZIP Code	Guaranteed Outstanding:			
4. Full Name (Last, First,	Middle Initial)		Name of Em	ployer		
Mailing Address	· · · · · · · · · · · · · · · · · · ·		Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:	1 1 7		
SUBTOTALS This Period Tr	is Page (optional).					
TOTALS This Period (last pa	age in this line only	/)		. >	haansh) waxad marad waxad () waxad mara yasad yasad yasad yasad yasad yasad yasad waxad yasad y	Parante Santa Santa Parante Santa Santa Parante Santa Santa
Carry outstanding balance	only to LINE 3. Sci	nedule D. for this lin	e. If no Schedule	D carry forward	to appropriate line of	f Summan

SCHEDULE C-1 (FEC Form 3) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for				
Information found on				
Page	of Schedule (

Federal Election Commission, Washington, D.C. 20463		rage or scriedule o	
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER	
Rine south			
LENDING INSTITUTION (LENDER)	Amount of Loan	Interest Rate (APR)	
Full Name			
		<u>.</u>	
Mailing Address	Date Incurred or Established	Mam / Dad / Array	
City State Zip Code	Date Due		
A. Has loan been restructured? No Yes	If yes, date originally incurred	Many / [200] / [2007]	
B. If line of credit, Amount of this Draw:	Total Outstanding Balance:		
C. Are other parties secondarily liable for the debt incurr No Yes (Endorsers and guarantors mu	red? ust be reported on Schedule C.)		
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? No Yes If yes, specify: Does the lender have a perfected section of this collateral?			
E. Are any future contributions or future receipts of intercollateral for the loan? No Yes If yes, s	specify: Wha	at is the estimated value?	
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Location of account:		
Date account established:	Address:		
Mam / Dad / Aalak	City, State, Zip:		
F. If neither of the types of collateral described above we exceed the loan amount, state the basis upon which	vas pledged for this loan, or if the ar this loan was made and the basis o	nount pledged does not equal or n which it assures repayment.	
G. COMMITTEE TREASURER		DATE	
Typed Name Signature		Mam / Ded / Assessed	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the tare accurate as stated above. II. The loan was made on terms and conditions (in similar extensions of credit to other borrowers of the institution is aware of the requirement that complied with the requirements set forth at 11 of the institution is aware.	ncluding interest rate) no more favora of comparable credit worthiness. a loan must be made on a basis wh	ble at the time than those imposed for nich assures repayment, and has	
AUTHORIZED REPRESENTATIVE		DATE	
Typed Name Signature	tie	() () () () () ()	

CHEDULE D (FEC Form 3)	(Use separate	PAGE OF				
DERTS AND ORLIGATIONS			FOR LINE NUMBER:	\Box		
xcluding Loans	for each numbered line)	(check only one)	9			
NAMES OF COMMITTEE (In Full) South		L		<u> </u>		
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):			
Mailing Address						
City State	Zip Code					
Outstanding Balance Beginning This Period				· · · · · · · · · · · · · · · · ·		
Amount Incurred This Period	Payment This Period	Outstand	ding Balance at Close of Th	nis Period		
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of	Debt (Purpose):			
·						
Mailing Address						
City State	Zip Code					
Outstanding Balance Beginning This Period						
Amount Incurred This Period	Payment This Period	Outstand	ding Balance at Close of Ti	nis Period		
			Connect 1 Secretary and Connect 19 Secretary Connect C	·		
C. Full Name (Last, First, Middle Initial) of Debto	r or Creditor	Nature of	Debt (Purpose):			
Mailing Address						
City	State Zip Code					
Outstanding Balance Beginning This Period						
Amount Incurred This Period	Payment This Period	Outstand	ding Balance at Close of Ti	his Period		
			danse()	Ф.		
1) SUBTOTALS This Period This Page (optional)						
2) TOTALS This Period (last page this line number	only)	>				
3) TOTAL OUTSTANDING LOANS from Schedule (C (last page only)					
4) ADD 2) and 3) and carry forward to appropriate	line of Summary Page (last page of	only) ▶				

FEC FORM 3Z (File with Form 3)

CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee)

Na	me	e of Principal Campaign	Committee (In Full)	Report Cover	ing Period:			
"		,		To:				
	•	7/1, ,	i M	- M		AND NOTE OF THE PROPERTY OF TH		
		Blue &	VVI -					
_						 -		
						(a) Line No. 11(a)	(b) Line No. 11(b)	
			Committee I	Name		Total Contributions From Indiv/Persons Other Than	Total Contributions	
L				Political Committees	From Political Party Committees			
	<u> </u>	 	· · · · · · · · · · · · · · · · · · ·					
В	C	olumn Total Last Page O	nly		-			
—	П	(c)	(d)	(e)	(f)	(g)	(h)	
		Line No. 11(c) Total Contributions	Line No. 11(d) Total Contributions	Line No. 11(e) Total	Line No. 12 Total Transfers	Line No. 13(a) Total Loans Made or	Line No. 13(b) Total All	
		From Other Political	From The	Contributions	From Other Authorized	Guaranteed by	Other Loans	
	\dashv	Committees	Candidate		Committees	the Candidate	· · · · · · · · · · · · · · · · · · ·	
	Α							
				-				
	B	<u></u>	/a			/\	(5)	
		(i) Line No. 13(c)	(j) Line No. 14	(k) Line No. 15	(I) Line No. 16	(m) Line No. 17	(n) Line No. 18	
		Total Loans	Total Offsets to Operating	Total Other	Total Receipts	Total Operating	Total Transfers to Other Authorized	
	Ш		Expenditures	Receipts		Expenditures	Committees	
	إرا							
	A	 						
	В							
		(o) Line No. 19(a)	(p) Line No. 19(b)	(q) Line No. 19(c)	(r) Line No. 20(a)	(s) Line No. 20(b)	(t) Line No. 20(c)	
	1	Total Loan Repayments of Loans Made or	Total Loan Repayments	Total Loan	Total Contribution	Total Contribution	Total Contribution	
		Guaranteed by The Can- didate	of All Other Loans	Repayments	Refunds to Individuals/Persons	Refunds to Political Party Committees	Refunds to Other Political Committees	
	H						· · · · · · · · · · · · · · · · · · ·	
	Δ				 			
	В	ii		•				
	Н	(u)	(v)	(w)	(x)	(y)	(z)	
	-	Line No. 20(d) - Total	Line-No21	Line No. 22 Total	Line No. 23 Cash on Hand	Line No. 27 Cash on Hand	Line No. 9 Debts & Obligations	
		Contribution	Disbursements	Disbursements	Beginning of	Close of	Owed TO the	
	Н	Refunds			Reporting Period	Reporting Period	Committee	
	Α	<u></u>				-		
	В	(0.7)	/652	(r-1)				
		(aa) Line No. 10	(bb) Line No. 6(c)	(cc) Line No. 7(c)				
	П	Debts & Obligations Owed BY the	Net Contributions	Net Operating Expenditures				
	Ц	Committee						
	A		})		
	H	 						
_	В							

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(8/2013)

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt Hand Delivered Postmarked **USPS First Class Mail** Postmarked (R/C) USPS Registered/Certified Postmarked **USPS** Priority Mail Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark Shipping Date Overnight Delivery Service (Specify): **Next Business Day Delivery** Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): DATE PREPARED